

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

| | | |
|---|---------------------------------|---------------------------------------|
| PLAINTIFF BENJAMIN KERENSA | FILED 27 FEB '19 13:41 USDC-ORP | COURT CASE NUMBER 3:18-cv-01388-HZ |
| DEFENDANT U.S. DEPT OF HOMELAND SECURITY | | TYPE OF PROCESS Civil |

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 U.S. DEPT OF HOMELAND SECURITY
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 245 Murray Lane, SW, Mailstop 0485, Washington DC 20528-0485

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

BENJAMIN KERENSA
 351 NE 78th Avenue
 Portland, OR 97213

Number of process to be served with this Form 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Alternative service to U.S. Attorney of Oregon who would represent government.

Signature of Attorney other Originator requesting service on behalf of:

☐ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|--------------------|------------------------------|-----------------------------|--|--------------------|
| I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) | Total Process 1 | District of Origin No. 65 | District to Serve No. 65 | Signature of Authorized USMS Deputy or Clerk | Date 02/08/2019 |
|---|--------------------|------------------------------|-----------------------------|--|--------------------|

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date
02/13/19Time
1119 ☒ am
☐ pmSignature of U.S. Marshal or Deputy

| | | | | | |
|------------------|--|---------------------|--------------------|-----------------------|---|
| Service Fee 0 | Total Mileage Charges including endeavors 0 | Forwarding Fee 8 | Total Charges 8 | Advance Deposits 0 | Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00 1FP |
|------------------|--|---------------------|--------------------|-----------------------|---|

REMARKS:

CM 9414 8169 0224 6689 8506 37

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED